DEVASTATING DATA: Failed Pregnancies Surge 43% Among Covid-Vaccinated Women

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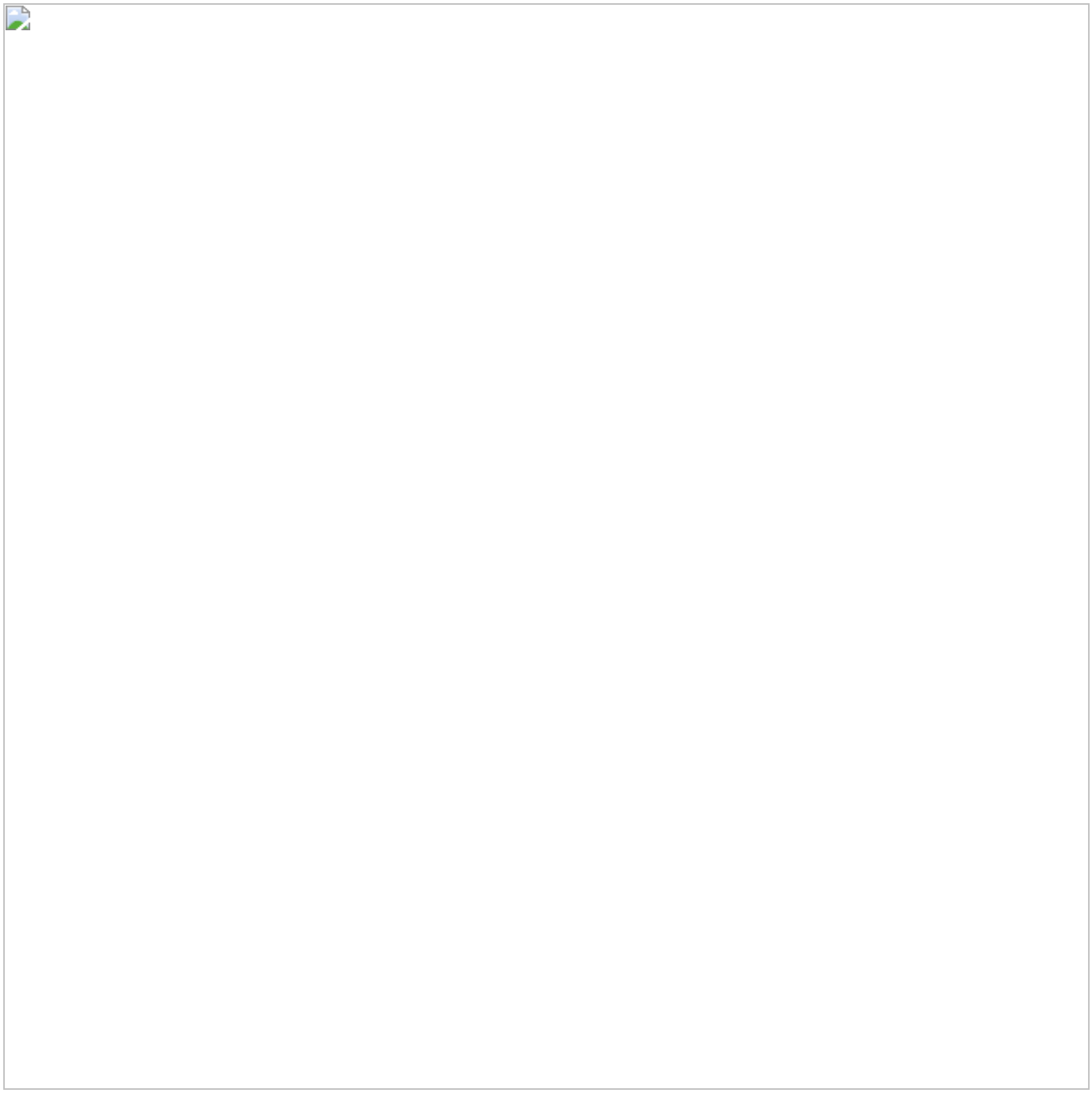


A group of leading researchers has uncovered explosive evidence buried in health data showing that failed pregnancies have surged dramatically among women who received Covid mRNA "vaccines."

The study found that women who received mRNA injections during early pregnancy experienced significantly higher rates of miscarriage and fetal loss than expected.

The researchers found a staggering 43% increase in fetal loss rates for women vaccinated in weeks 8–13 of pregnancy after their first Covid shot.

The study is based on electronic health records (EHR) from one of Israel's largest health insurance providers.

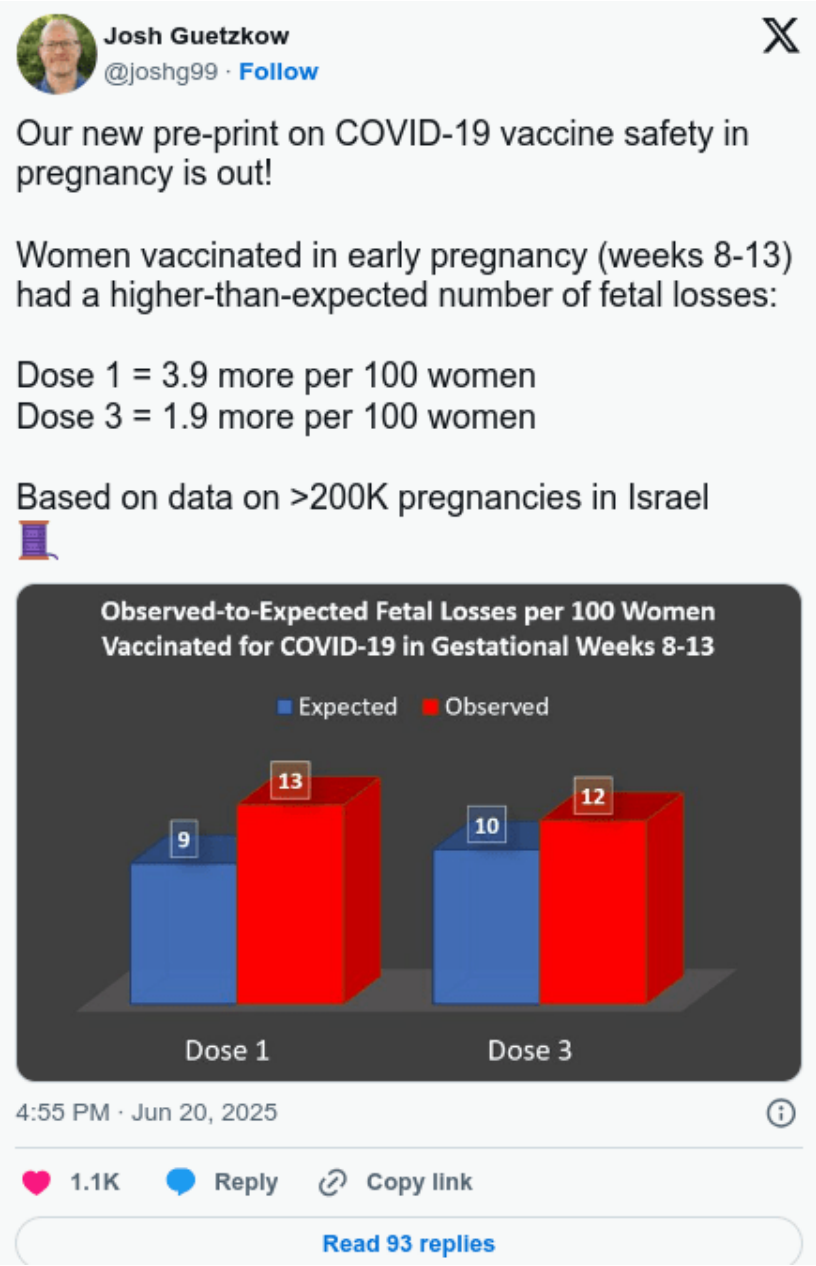
Key findings from the study include:

- Dose 1 (weeks 8–13) was associated with 3.9 more fetal losses per 100 women than expected — a 43% increase (13 vs. 9 per 100).
- Dose 3 (weeks 8–13) was linked to 1.9 more losses per 100 women, or 19% higher than expected (12 vs. 10 per 100).
- Late pregnancy losses made up a significant portion of these outcomes. Among all women, 1.1% experienced pregnancy loss after week 24. That number rose to 2.7% for women who received dose 1 in early pregnancy and 1.8% for dose 3 recipients.

The study was led by Dr. Josh Guetzkow, a senior lecturer in criminology and sociology at Israel's Hebrew University of Jerusalem.

Guetzkow's team of researchers includes top advisers to President Donald Trump's Food and Drug Administration (FDA) and Centers for Disease Control and Prevention (CDC).

The results of the study were published in the medRxiv journal.


Josh Guetzkow
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Our new pre-print on COVID-19 vaccine safety in pregnancy is out!
Women vaccinated in early pregnancy (weeks 8-13) had a higher-than-expected number of fetal losses:
Dose 1 = 3.9 more per 100 women
Dose 3 = 1.9 more per 100 women
Based on data on >200K pregnancies in Israel
Observed-to-Expected Fetal Losses per 100 Women Vaccinated for COVID-19 in Gestational Weeks 8-13
Expected
Observed
9
13
10
12
Dose 1
Dose 3
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The data showed that nearly half of the excess fetal losses occurred after week 24 of gestation, a stage where abortions are extremely rare in Israel and must be medically justified.

This, researchers say, points to a biological mechanism, not a behavioral one.

In contrast, influenza vaccination during the same gestational period (weeks 8–13) showed lower-than-expected fetal losses, with approximately five fewer per 100 women vaccinated.

This comparison is crucial.

Researchers note that using flu vaccination as a control helps mitigate “healthy vaccinee bias.”

The healthy vaccinee bias is the theory that people who vaccinate tend to be healthier and more health-conscious than those who don’t.

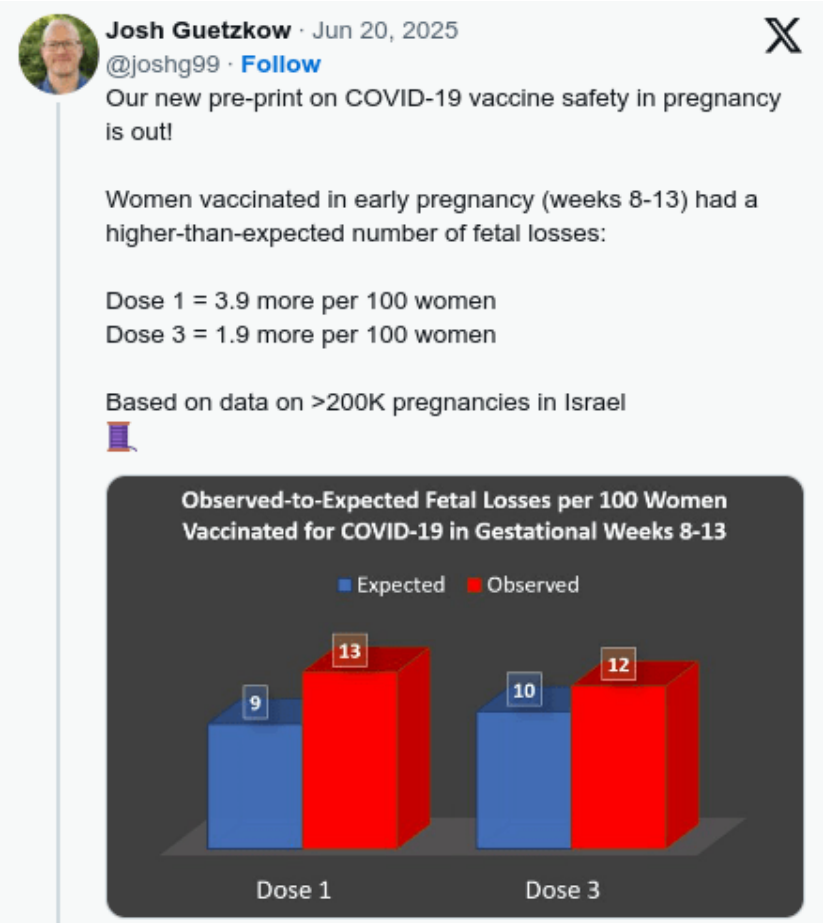
The fact that flu vaccination was associated with fewer fetal losses, while Covid “vaccination” was associated with more, underscores the abnormality of the mRNA “vaccine” outcomes.

Healthy vaccinee bias often makes vaccines appear safer in real-world data than they actually are.

That the Covid “vaccine” still produced a strong negative signal despite this bias suggests the biological risks are substantial.

The paper’s authors argue that if flu-vaccinated and Covid-vaxxed women in early pregnancy had similar health profiles, then comparing their fetal loss rates is a valid way to detect real risk.

The conclusion: mRNA “vaccination” in early pregnancy showed an unexpectedly high rate of pregnancy loss.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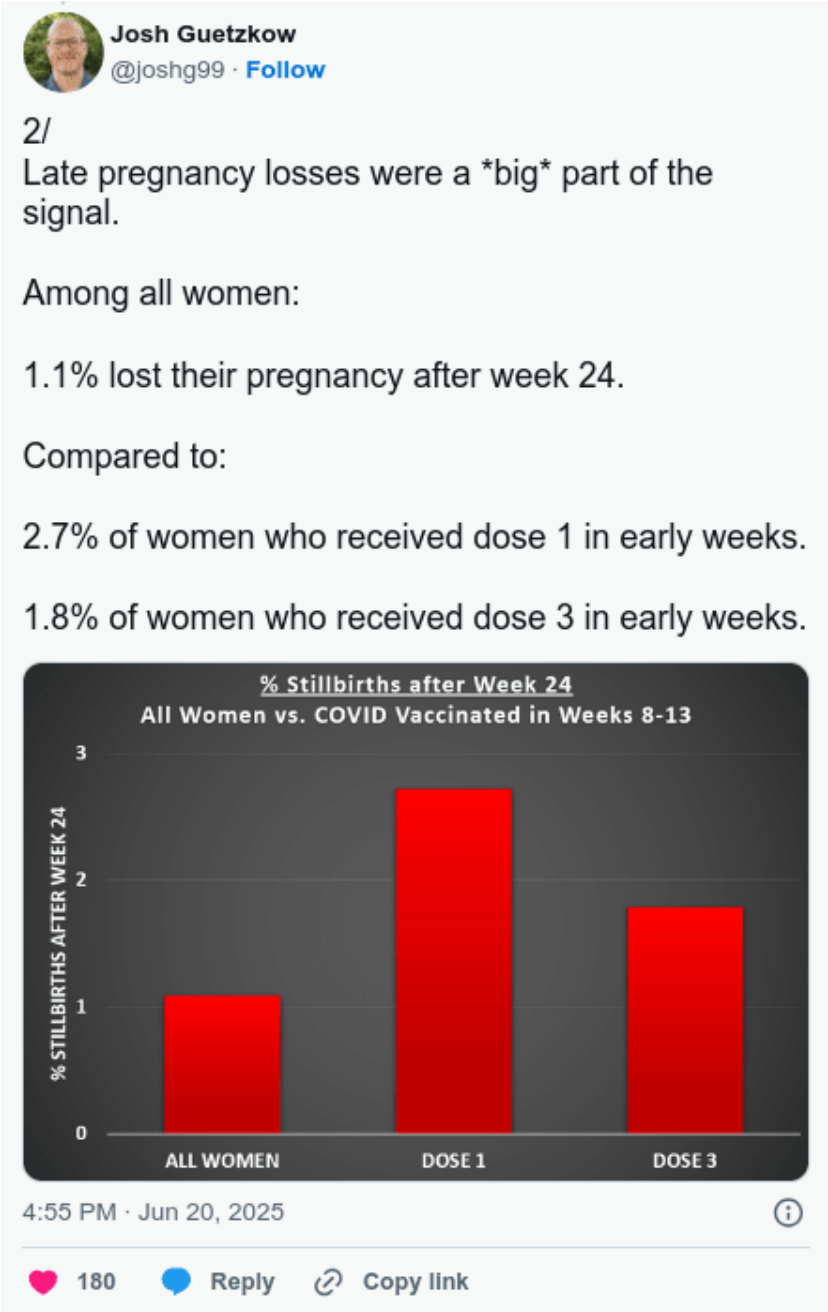

Previous studies may have missed this safety signal for several reasons.

Most did not focus on early pregnancy, and many split early and late losses using assumptions that weakened their ability to detect patterns.

Nearly all compared vaccinated to unvaccinated women during active vaccine campaigns.

This methodology is especially vulnerable to bias.

The research team used a different approach, however.

They constructed a statistical model using pre-Covid data (2016–2018) to estimate expected fetal loss rates for each woman based on her individual risk factors and gestational week.

This model was then applied to data from 2020–2022 to calculate expected losses for vaccinated women.

For unvaccinated women and those vaccinated before pregnancy, the model's predictions held up.

However, for women "vaccinated" with Covid mRNA injections during early pregnancy, the model sharply underestimated fetal losses.

In contrast, it overestimated fetal losses for women vaccinated against influenza, consistent with the presence of healthy vaccinee bias.

These patterns, researchers argue, reinforce the credibility of the Covid "vaccine" signal.

The researchers said that "almost all" mRNA doses were made by Pfizer.

Alarmingly, the pharmaceutical company's own 2021 report to the FDA shows 44% of women in Pfizer's clinical trial lost their pregnancies.

The FDA attempted to hide the report for 16 months until a court made it public.

The study was authored by a team of medical and data science experts, including Professor Retsef Levi of MIT, a current member of the U.S. Advisory Council on Immunisation Practices (ACIP).

Co-authors included clinicians from Maccabi Health Services, the Israeli insurance fund from which the data was drawn, including Tal Patalon, Sivan Gazit, and Yaakov Segal, head of OBGYN services at Maccabi. A

Additional contributors included Tracy Beth Hoeg, now affiliated with the FDA, and Joseph Fraiman, lead author of a separate reanalysis of mRNA shot trial data that found significant safety concerns.

The authors noted that none of the contributors would have agreed to participate in such a controversial study unless they were "extremely confident that the results are rock solid."

According to the study's discussion, multiple attempts were made to challenge or disprove the findings, but each effort only reinforced the results.

The research focused exclusively on data from Israel, one of the first nations to implement widespread Covid "vaccination" and one of the earliest to study potential adverse effects.

The findings raise serious questions about the safety of Covid "vaccination" during early pregnancy, especially when compared to the flu shots.

As the paper concludes, mRNA "vaccination" in early gestation appears associated with a substantial increase in late pregnancy losses, warranting urgent attention from health regulators, policymakers, and expectant mothers around the world.

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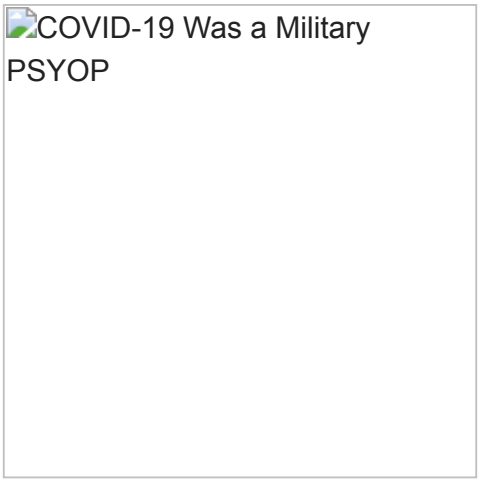

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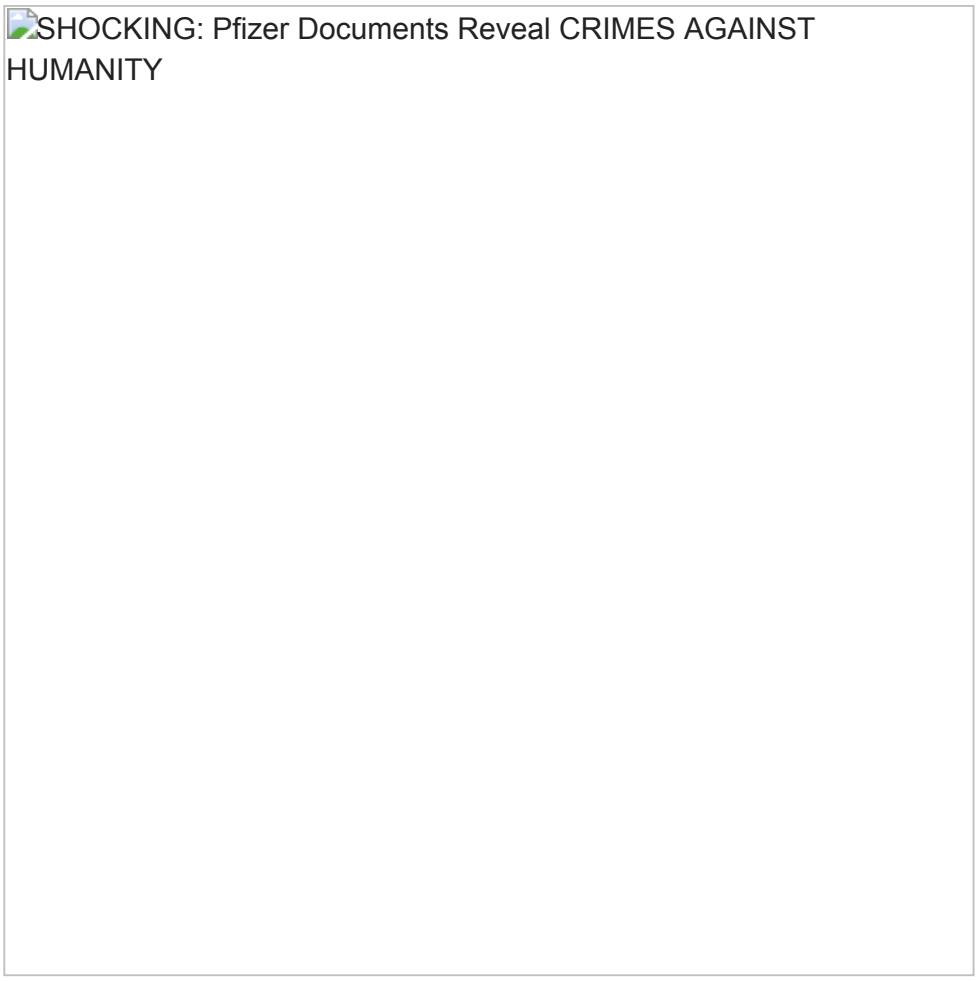

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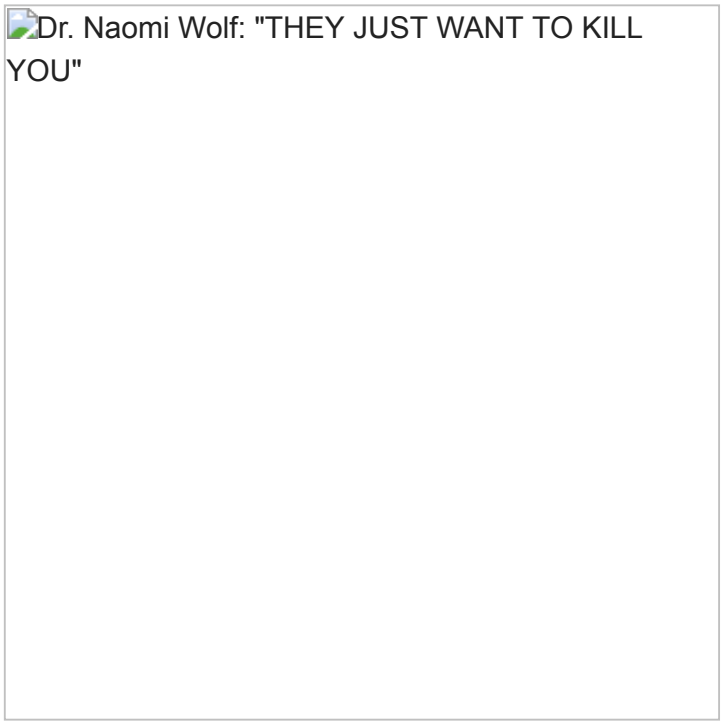

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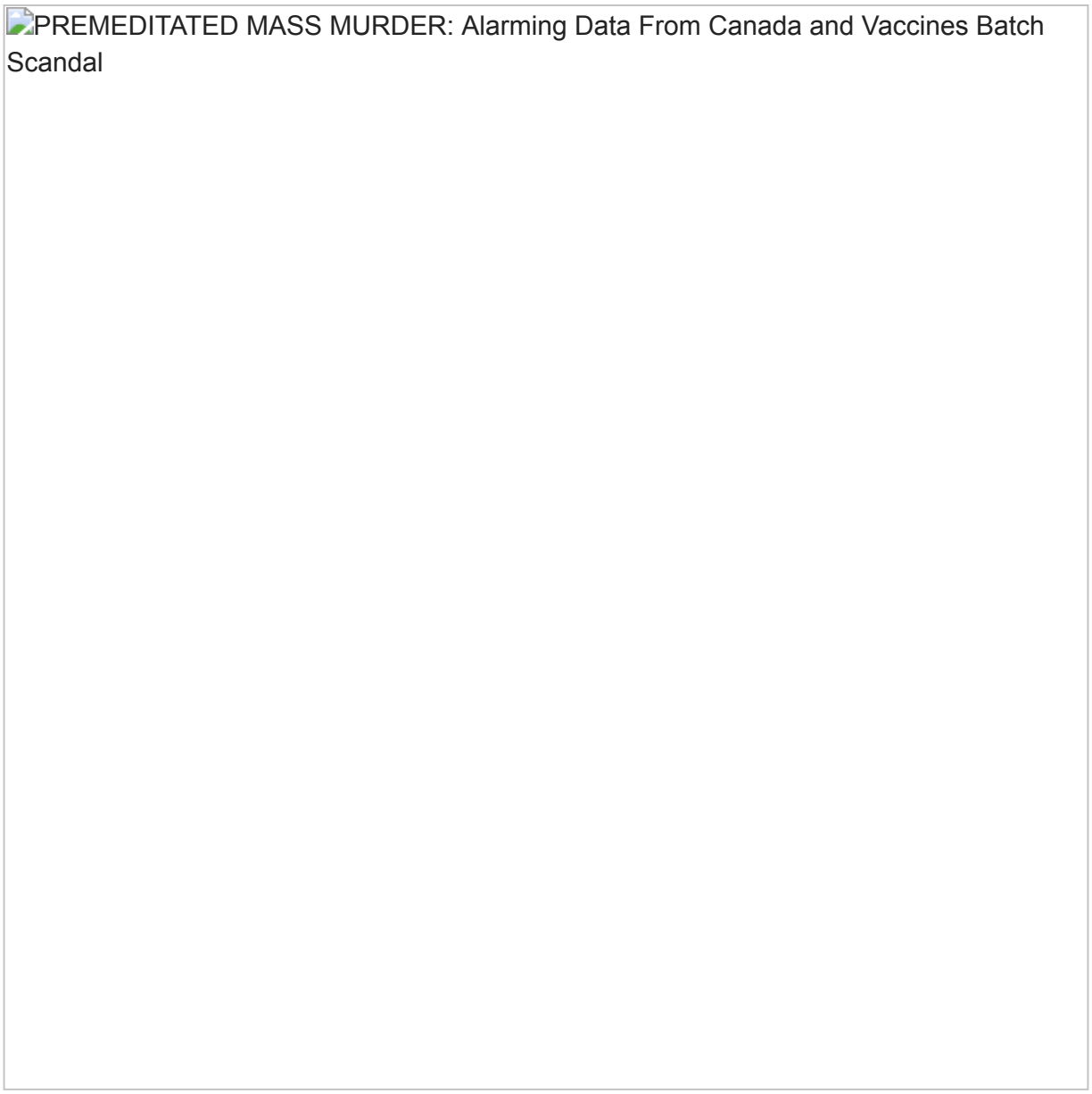

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